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DECLADATION FOR	Attorn y Docket Nun	iber	WCWIIIIan. 14	22		
DECLARATION FOR UTILITY OR DESIGN		First Named Inventor		Stacy McMillan		
PATENT APPLI	COMPLETE IF KNOWN					
(37 CFR 1.63)		Application Number				
Declaration	Declaration Submitted after Initial Filing (surcharge	Filing Date	,	v.		
Submitted OR		Art Unit	,			
with Initial Filing	Examiner Name					
As the below named inventor, I here	eby declare that:			, , <u></u>		
My residence, mailing address, and cit	tizenship are as stated belov	v next to my name.				
I believe I am the original and first inve	entor of the subject matter wh	nich is claimed and for whic	h a pate	ent is sough	nt on the invention entitled:	
PORTABLE HIGH-HAT I	DEVICE					
PORTABLE HIGH-HAT I	DEVICE					
·					. 1	
	(Title of the In	vention)				
the specification of which	(This of the III	·				
is attached hereto						
OR -						
was filed on (MM/DD/YYYY)		as United States A	pplicatio	n Number	or PCT International	
<u> </u>						
						
Application Number	and was amende	d on (MM/DD/YYYY)		 	(if applicable).	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.						
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT						
international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant						
breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)		iority Clalmed	Certified Copy Attached? YES NO	
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Additional foreign application nu	mbers are listed on a supple	mental priority data sheet I	PTO/SB	/02B attach	ned hereto:	

[Page 1 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Nu or Bar Code		00027547	OR C	Correspondence address below	
John J. Murphey, Reg. No.: 24,896 Hani Z. Sayed, Reg. No.: 52,544 Name					
Murphey & Murphey, A.P.C. 701 Palomar Airport Road, Suite 260					
Carlsbad City		Cali State	fornia .	92009 zip	
US Country	760-431-00 Telephone	91		760-431-9441 Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:					
Given Name Stacy L. Given Name (first and middle [if any]) McMillan Family Name or Surname					
inventor's Stay McMilla Date 6-23.03					
San Marcos	Califor	nia	US	US	
Residence: City State Country Citizenship 1718 Lindsley Park Drive				Citizensnip	
Mailing Address					
San Marcos	Califori State	nia	92069 ZIP	US Country	
NAME OF SECOND INVENTOR:		has been	filed for this unsig		
Given Name (first and middle [if any])		Family or Sur	Name name		
inventor's Signature				Date	
		,			
Residence: City	State		Country	Citizenship	
Malling Address					
		,			
City Additional inventors are being named on the	State		ZIP	SB/02A attached hereto.	

Please type a plus sign (+) inside this box	▶ 1	F
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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Applicati n Number	
Filing Date	
First Named Inventor	Stacy McMillan
Title	Portable High-Hat Device
Group Art Unit	
Examiner Name	
Attorney Docket Number	McMillan.1422

I hereby appoint:				
OR	at Customer Number	000027547	□	Place Customer Number Bar Code Label here
Practitioner(s)	named below:			
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TOHOT.	• MURPHEY		24,896	
	. SAYED		52,544	
			1 22,311.	
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I am the: X Applicant/Inv	entor.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Stacy McMillan				
Signature Saym Min m				
Date 6-23.03				
NOTE: Signatures of all the i forms if more than one signa		of the entire interest of	or their represent	ative(s) are required. Submit multiple
□ *Total of 1 forms are submitted.				